

This report is mandatory under P L 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440.



Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true, correct, and complete. (See the section on penalties in the instructions.)

Signed

On

Date _____

Telephone Number

Name of Person Filing

Gerald F Gross

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4 **9 Business deals with**☐ a Labor Organization☐ b Trust☐ c Employer**10 If 9 b or 9 c is checked give trust or employer's name**Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4 **11 a Nature of such dealing****11 b Approximate dollar value of such dealing****12 a Nature of interest held or income received****12 b Amount****C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value****13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)**Name Blue Cross Blue Shield of MassachusettsTrade Name if any P O Box Bldg Room No if any Landmark CenterStreet 401 Park DriveCity BostonState Massachusetts ZIP Code + 4 02215-3326**14 a Nature of payment**

5/6/04 Golf at Pine Hills \$65 00

9/24/04 Golf at Pine Hills \$103 50

10/17/04 New England Patriots -

2 @ \$100 00 each

13 b Is the Business an Employer ☐ or Consultant ☒ ?**14 b Amount of payment**

\$368 50



Gerry King
Account Executive
Labor Affairs
Health and Welfare Funds

Tel (617) 246-7908
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charles.king@bcbsma.com

Landmark Center
401 Park Drive
Boston MA 02215 3326

July 25, 2005

Mr Gerry Gross, Principal Officer
Teamsters Local 653
4A Hampden drive
South Easton, Ma 02375

Dear Gerry

The following is what our records show regarding information for the Labor-
Management Reporting and Disclosure Act

Date	Activity	Amount
May 6, 2004	Golf at Pine Hills	\$65
September 24, 2004	Golf at Pine Hills	\$103 50
October 17, 2004	New England Patriots	2 @ \$100 each

Gerry if there are any questions or this does not jive with your records, please give me a
call

Sincerely,


Gerry King